

Consciousness-Raising Workbook for Re-Telling the Story of Ourselves



Part of
THE LEARNING AND SELF-DEVELOPMENT COLLABORATIVE

Inspiration and Purpose

This self-guided workbook aims to open up possibilities for exploring aspects of our self from multiple different angles that, together, reflect the complexity, depth, and richness of being human. Multiple generations of people have now been told that their pain and distress is the result of a chemical imbalance or a dysfunction that lies within their own biology, and that treatment involves “managing symptoms” via one or more mood-altering substances, such as stimulants, antidepressants, or antipsychotics.



However, we know that this “illness” framework for understanding our pain and distress is driven by cultural demands and the interests of resource-heavy groups, including the pharmaceutical industry and the many professions and bodies that, in different ways, depend on a system of simple diagnosis and quick-fix medical treatment. Science and marketing have become blurred, and the varied voices of persons with lived experiences of extreme distress are too often dismissed or minimized.

Through this consciousness-raising workbook, we aim to “lift the veil” on confused messages and bad information on multiple levels that all of us, and young persons in particular, might be exposed to. We aim to open up possibilities for relating differently to ourselves, our experiences, our emotional pain, and the use of medicines/drugs.

We believe in the power of community, self-exploration, authenticity, and critical dialogue to engage and make meaning of our experiences, even the intense and terrifying ones. This workbook was formed from a **collaboration** of people who share these values and are actively pursuing their own **learning** and **self-development** in the ways offered throughout the pages that follow. We welcome you and invite you to explore with us!

EXPLORERS' GUIDE

PART 1: HOW DO WE RELATE TO OUR BODY, EMOTIONS,
AND INNER SELF? PAGE 5

PART 2: HOW DO WE RELATE TO EMOTIONAL PAIN IN THE
CONTEXT OF THE SOCIETY WE LIVE IN? PAGE 19

PART 3: HOW DO WE RELATE TO OPPRESSION AND THE SOCIAL
DEMANDS, EXPECTATIONS, AND PRESSURES PUT ON US? PAGE 31

PART 4: HOW DO WE RELATE TO WHAT'S INVISIBLE AND THE
CONNECTION/DISCONNECTION WE FEEL TO THINGS LARGER
THAN OURSELVES? PAGE 43

PART 5: HOW DO WE RELATE TO DRUGS AND MEDICINES USED
TO ALTER OURSELVES? PAGE 53

PART 6: HOW DO WE RELATE TO OURSELVES AS AGENTS OF
CHANGE FOR OURSELVES, OUR PEERS, AND OUR
COMMUNITY?..... PAGE 67

Special Thanks



College of Health & Human Sciences

School of Social Work



FOUNDATION FOR EXCELLENCE
IN MENTAL HEALTH CARE™

This workbook represents a powerful coming together involving investments from many people for whom we hold deep appreciation. Primary writing credits go to Dr. Shannon Hughes who managed this project and pieced all the voices involved into a coherent whole. Thank you to all the members of The Nowak Society who contributed to developing and delivering this curriculum in our pilot project: Mara Holloway, Dr. Rob Colbert, Katie Klumb, Lauren Fishbein, Amy Van Sweden, Stephen Thomas, Shane LeMaster, and Lindsey Aronson. Our consultants, Steven Morgan and Dr. Ronald Bassman, offered invaluable feedback and words of encouragement—thank you.

This curriculum would not have been possible without the financial support of the Foundation for Excellence in Mental Health Care, which sees the need for shifting narratives around distress and is generously funding alternatives to that end. Please note that funding does not imply endorsement or agreement with the content of this guide.

Finally, we thank you, the reader of this workbook, for showing up in the spirit of exploration and meaning-making. We hope you acknowledge and honor that part of yourself that is reaching for self-understanding and growth. It is, indeed, the path we are all on, and we eagerly invite you to plug into the power of your story and of this community we together hold.

This workbook is available as a free file download. You have advance permission to print, copy, share, link, and distribute as many copies as you would like, as long as you include source attribution. Please contact us for questions, or to inquire about having us facilitate this curriculum with your group.

www.nowaksociety.org

www.chhs.colostate.edu/ssw/research/alternatives-for-mental-health-and-healing-lab

Suggested citation: Hughes, S., Colbert, R., Holloway, M., Klumb, K., Van Sweden, A., & Fishbein, L.. *Consciousness-raising workbook for re-telling the story of ourselves*. The Learning and Self-development Collaborative. Fort Collins: The Nowak Society, 2018.

PART 1:

HOW DO WE RELATE TO OUR BODY, EMOTIONS, AND INNER SELF?

In our society, feelings and emotions are not always valued as important sources of information. We often try to **hide, repress, or banish** our so-called “negative” emotions because it seems like society only wants to see us be happy and optimistic.



Have you ever felt like your emotions were **too big** or **too much** for others to handle?

What happened in those situations?

Did you get shut down, told that you're too much, or (in some contexts) was medication the tool used to deal with the intensity of your feelings?

WHAT ARE SOME OF THE MESSAGES YOU'VE RECEIVED ABOUT YOUR EMOTIONS?

- ☐ My emotions are too much/too big for others
- ☐ My emotions are irrational
- ☐ I can't trust my feelings or emotions
- ☐ I shouldn't share my feelings or emotions
- ☐ I need to banish or get rid of my negative emotions
- ☐ I'm an "emotional mess"
- ☐ Other messages? _____



WHAT ARE SOME OF THE WAYS SOCIETY REPRESSES THE EXPRESSION OF EMOTIONS?

- ☐ "Boys don't cry"
- ☐ "Women are irrational when they're emotional"
- ☐ Free expression of sexuality for men is boastful; for women, it's disreputable
- ☐ Showing emotions is a sign of weakness
- ☐ "Be reasonable," don't let your emotions "get ahold of you"
- ☐ Other ways our emotions are repressed? _____

Learning from Animals

Animals in the wild routinely face life-threatening challenges and scares. For example, when a zebra is chased by a lion, its adrenaline surges and it runs for its life. When the zebra reaches safety, it discharges all of the adrenaline energy by trembling, shaking, or jumping around.

A zebra doesn't hold the tension of its past chase in its body. It doesn't live in the past by thinking, "A lion chased me last week and I'm really stressed out about it" or "That lion almost got me last month and I'm still having nightmares!"

A zebra shakes it out until its nervous system is calmed and the energy of the incident is discharged from its body. And no zebra tells another to buck up or get over it!



Humans too have a natural tendency to shake or tremble in the face of a serious scare or traumatic event. However, our thinking brains and social demands come into play pretty quickly and the energy of the situation is stopped from being fully discharged from the body.

Learning from Animals

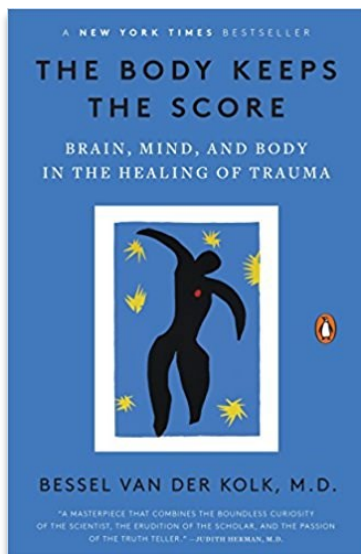


As another example, think about a bear pacing in a zoo.

A bear isn't meant to be in a zoo. They can't function there. The environment of a zoo is not in alignment with their natural needs and behaviors.

The behavior of pacing is a reaction to being caged in an environment that a bear does not thrive in.

What might our own bodily responses to people and situations be telling us?



To explore more in depth all the ways the body holds trauma, abuse, and past events, pick up this book, “The Body Keeps the Score.”



“When I attend to, rather than try to banish, them, *my feelings offer me information*; they provide clues that something may be wrong in the story I’m telling about myself and the world.” - Miguel Mallet



Our feelings are not our enemy. In fact, they often hold important, rich information for us to pay attention to.

Just as the physical pain we experience when we’re pricked with a sharp object gives us the information we need to move away, our emotional pain can also serve as a messenger.

All feelings, including the ones we experience as negative, can provide us
information about our needs.



I was always taught that anger is bad. But when I've listened to my anger, it's told me that a boundary or something that I highly value has been violated.

When I start to feel depressed, it tells me that something in my life is not in alignment.



I've learned that my anxiety means that I care a lot about the thing or situation I'm anxious about, but I'm trying to control things that I can't control.

My body gets physically ill when I'm around a certain person. I know my body is telling me that I need to separate myself from this person or situation.



What information are your feelings offering YOU?

If I listened to my _____ ...

(anger, rage, hopelessness, anxiety, etc.)



... What might it be telling me?

... What might it be leading me to?

For example, it might be telling me that...

- ☐ Something in my life is out of alignment
- ☐ A relationship in my life needs to be attended to
- ☐ Something in me is trying to come out or be expressed
- ☐ What else? _____

What information are your feelings offering YOU?



Even though we speak in terms of “positive” emotions and “negative” emotions, really, they are just information. And **all of them are normal human experiences.**

If we think we’re not supposed to feel anxious, angry, depressed, or overwhelmed, then we’re setting ourselves up for failure!

Instead of labeling our emotions good or bad, let’s ask a different question:

What is the gift of this emotion?

For example, **rage** can be very creative energy. The Hawaiian goddess, Pele, is said to both destroy and create the land. She is simultaneously full of rage and full of creative power.



How do you hold rage and witness it, without suppressing it? How do you utilize the gift of rage as creative fuel, as Pele does, without hulk-smashing everything in front of you to no productive end?



How do we listen to what our body and our emotions are trying to communicate for us? Most of the time, *we live disconnected from our bodies.*

How do we re-connect and tune into our bodies so that we may really listen to the information that it's trying to share with us?

Step 1: Notice. Here are some questions that can help us to establish our baseline and identify the patterns we might be holding.

- Do you recognize sensations in your body related to emotions? What are they?
 - Fidgeting, pacing, moving
 - Collapsed, like you can't get out of bed
 - Throat tightness
 - Rate of breathing (breathing quickly, or holding your breath)
- How do depression and/or anxiety, specifically, impact your body?
 - How you eat? Eat too little, eat a lot?
 - How you sleep? Sleep too little, sleep way too much?
 - How you move or exercise your body? Body doesn't want to move at all, or body can't stop moving?
 - How you interact or engage with others? Withdrawing from others, or inability to be alone at all?
 - Do you go into hyperarousal?
 - * Anger, rage, frustration?
 - * Anxiety, fear, panic?
 - Do you go into hypoarousal?
 - * Depression, dissociation?
 - * Shame, homelessness, shut down?
- What are some of your default patterns when you're feeling overwhelmed?

Once recognized, your **awareness of your body** can also be a source of information. The next page has a body scan exercise you can use to start noticing what's in your body.

Body Scan Exercise

Practice: 20-30 minutes, three to six days per week for four weeks. Research suggests that people who practice the body scan for longer reap more benefits from this practice. The body scan can be performed while lying down, sitting, or in other postures. The steps below are a guided meditation designed to be done while sitting.

Begin by bringing your attention into your body. You can close your eyes if that's comfortable for you or if you prefer you can keep your eyes open and your gaze lowered and soft.

You can notice your body seated wherever you're seated, feeling the weight of your body being supported by your seat, being held in place by gravity.

Take a few deep breaths into the belly.

As you take a deep breath in, allow yourself to feel the sensation of the breath moving into you and filling you. As you exhale, allow yourself to release any tension, allowing your body to fully relax.

Notice your feet on the floor, being held in place by gravity. There is nothing for you to do but notice the sensations present in your feet.

Bring your awareness to your legs, beginning at your ankles and moving up to the top of your thighs. Notice any sensations in your left leg; notice any sensations in your right leg. Allow yourself to be fully aware of your legs, allowing yourself to release any tension and relax your legs.

Take a deep breath in.

Now bring your awareness up to your hips. Notice if there is tightness or if they are relaxed. Allow yourself to be aware of your hips, releasing any tension that is stored in your hips.

Notice your back against the chair, bringing awareness to your entire back. Notice any sensations and allow your back to relax.

Take a deep breath in.

Now bring your attention into your stomach, your lower abdomen and the upper abdomen. If your stomach is tense or tight, let it soften and relax. Take a breath and notice sensations that are alive in your stomach area. Allow any tension to release.

Notice your hands. Are your hands tense or tight? Allow them to soften and relax, releasing any tension from your left hand and then releasing any tension from your right hand.

Notice your arms. Feel any sensation in your arms and allow them to relax. Let your shoulders be soft and the space between your shoulder blades to relax and separate.

Take a deep breath in.

Notice your neck and throat. Allow yourself to notice any sensations in this part of your body. Allow yourself to relax and release any tension in your neck and throat.

Now bring your awareness to the muscles in your face. Soften your jaw and allow the area around your eyes to relax. Allow the muscles in your forehead to relax and separate. Let your facial muscles be soft, allowing yourself to relax and release.

Take a deep breath in.

Coming back to the entire body, be aware of your whole body as best you can. Take a breath in. And then when you're ready, you can open your eyes, slowly allowing yourself to bring your awareness back into this space.

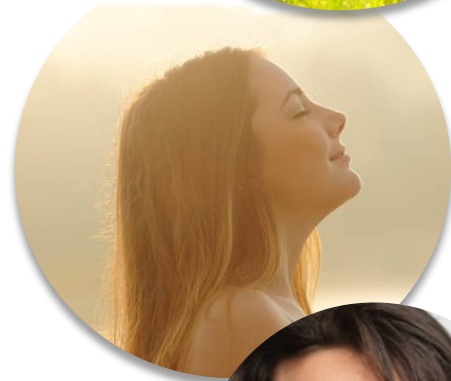
Integrating Body Awareness

Allow yourself to remain curious about what it feels like in different areas of your body. Let **curiosity** and **intuition** guide you. There is no need to force or change any part of your experience.

- Without judgment, how would you describe how you feel right now after completing the body scan exercise?



- What do you feel in your body, and where do you feel it?



- Does it have anything to tell you?



- What does your body crave?

- Identify three ways to give your body what it needs.

1. _____
2. _____
3. _____

Integrating Body Awareness

Once we **notice** what's going on in our bodies with a desire for listening to what it might be telling us, it might require that we then **take action**.

Action steps involve bringing our body back into a sense of balance (whatever that means for us). Often our intuition or inner self is the guide for what actions to take.



For example:

- If you're overly anxious and moving a lot, try slowing down and doing some breathing exercises.
- If you drink coffee when you're tired but coffee makes you anxious, try a different action, such as getting more sleep or eating foods that naturally increase energy.

Integrating Body Awareness



Even when it's **really** hard, try taking any small step to support the body to bring it into balance.

Sometimes your body really does crave rest. Sometimes our inner self knows our body wants to move, but all we can muster is to lay in bed. In these times, take **any** steps to re-engage the body, like pushing against the wall, stomping, or throwing your arms wildly.

What actions might you take when you notice your body is feeling out of whack?

Make a list here of self-care, self-soothing, or action-promoting steps that could work for you:

<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>

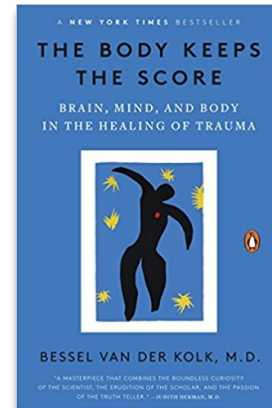
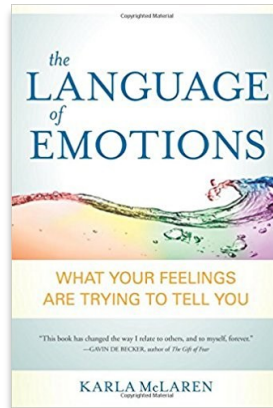
“Through the years, anger and sadness have warred inside me, and when I suppressed both feelings, they reemerged as uncertainty and self-reproach, anxiety and depression... Mainly because I couldn’t escape my feelings, I began to *pay more attention to them, to listen* to what they had to tell me, and I started to see *what my feelings did for me* and not just what I thought they did *to me*.” - Miguel Mallet



To Read:

Web Search: On Being, “My Feelings are Not My Enemies”

<https://onbeing.org/blog/miguel-clark-mallet-my-feelings-are-not-my-enemies/>



To Watch:

- “Emotional Mastery: The Gifted Wisdom of Unpleasant Feelings...” <https://www.youtube.com/watch?v=EKyI9WzkPxE>
- “How to Discharge Trauma—Trauma Release Polar Bear” <https://www.youtube.com/watch?v=BwFTA68RZW8>
- “Mindfulness Meditation Body Scan” (10 minutes) <https://www.youtube.com/watch?v=CyKhfUdOEgs>
- “Body Scan Meditation—Jon Kabat Zinn” (30 minutes) <https://www.youtube.com/watch?v=ofT5iLr09Jk>

To Do:

Take a moment when you first wake up in the morning to check-in with your body—what feelings, sensations or emotions do you notice? Check back in with your body throughout the day... if/when/how do these emotions and sensations shift as the day unfolds? See if you can notice: *Is there an underlying feeling that sticks with you? Does it increase or decrease in intensity? Do you feel certain things only when a particular person is around you? What might these emotions/sensations be trying to tell you?*

PART 2: HOW DO WE RELATE TO EMOTIONAL PAIN IN THE CONTEXT OF THE SOCIETY WE LIVE IN?



Sometimes it seems like the way we feel has no basis in anything, like there's no good apparent reason to feel _____ [you name it—sad, anxious, irritable, uncaring, pissed off, etc.], and the only thing we can conclude is that there must be something wrong with us.

In fact, though, **A LOT** of people today are feeling these things.

1 IN 10 AMERICANS ARE CONSIDERED TO HAVE A MENTAL HEALTH PROBLEM AT ANY GIVEN TIME

1 IN 6 AMERICANS TAKE SOME KIND OF PSYCHIATRIC MEDICATION,
MOST COMMONLY AN ANTIDEPRESSANT, ANTI-ANXIETY DRUG, OR SEDATIVE

8-13% OF YOUTH TAKE SOME KIND OF PSYCHIATRIC MEDICATION

ANTIDEPRESSANT USE **INCREASED 65%** IN THE U.S. FROM 1999 TO 2014

... This trend of more and more people feeling distressed (and taking mood-altering substances) continues to increase over time. Emotional pain is not becoming *less* of a problem; it's *more* and *more* of a problem for *more* and *more* people.

REFLECT... How have you observed this trend in your own life?

... Increased mental health problems and use of medications in our society...
What does it look like and feel like from *your* vantage point?

- * Among your friends, family, acquaintances?

- * Among strangers and people you encounter in day-to-day life?

- * In the media, e.g., reports and headlines of depression, anxiety, loneliness, etc.?

"THERE IS NO SUCH THING AS HUMAN NATURE INDEPENDENT OF CULTURE"

--CLIFFORD GEERTZ

REFLECT...

Have you observed or felt any of these common *social problems*?

- mental illness
- teen pregnancy
- obesity and health problems
- neighborhood violence, not feeling safe where you live
- low educational performance
- poor social relations
- crime, homicide

Each of these social problems has a whole slew of things being done to tackle each problem separately, such as:

- policies to reduce overcrowding in prisons,
- policies to curb teen pregnancy,
- policies to raise children's performance in school,
- and so on...

Each of these problems has interventions to try to help (or fix) the individual experiencing the problem, such as:

- counseling and medications for mental illness,
- tutoring programs for children,
- exercise programs for obesity,
- among many, many others.

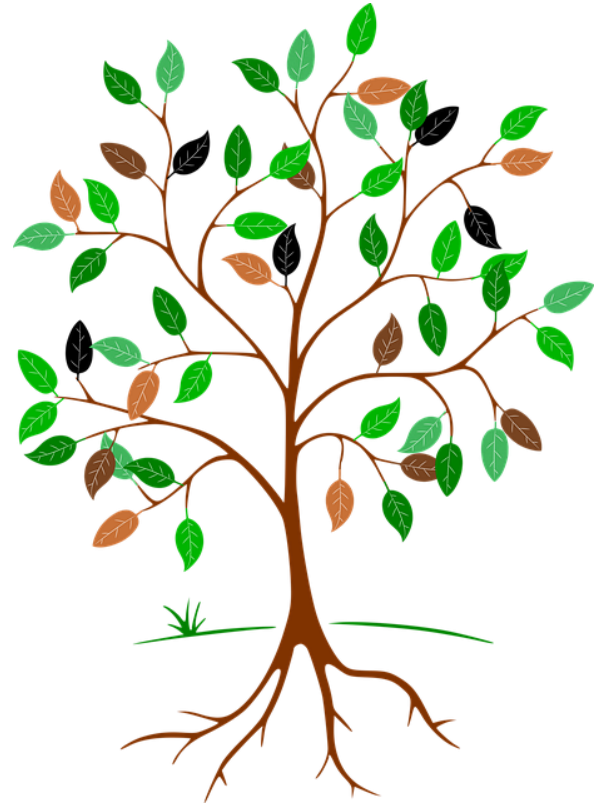
...But what if there was a bigger underlying issue that connected all of these problems?



WHAT DO YOU THINK MIGHT BE THE UNDERLYING ROOT THAT CONNECTS PROBLEMS LIKE THESE?

Social Problems

- mental illness
- teen pregnancy
- obesity and health problems
- low educational performance
- neighborhood violence, not feeling safe where you live
- poor social relations
- crime, homicide



Potential Root Issues?

☐ Poverty

☐ Oppression

☐ Trauma

☐ Income inequality

☐ Other ideas: _____

☐ Other ideas: _____

Why? Why or how would the root issue you checked above connect to all these other problems that people experience?

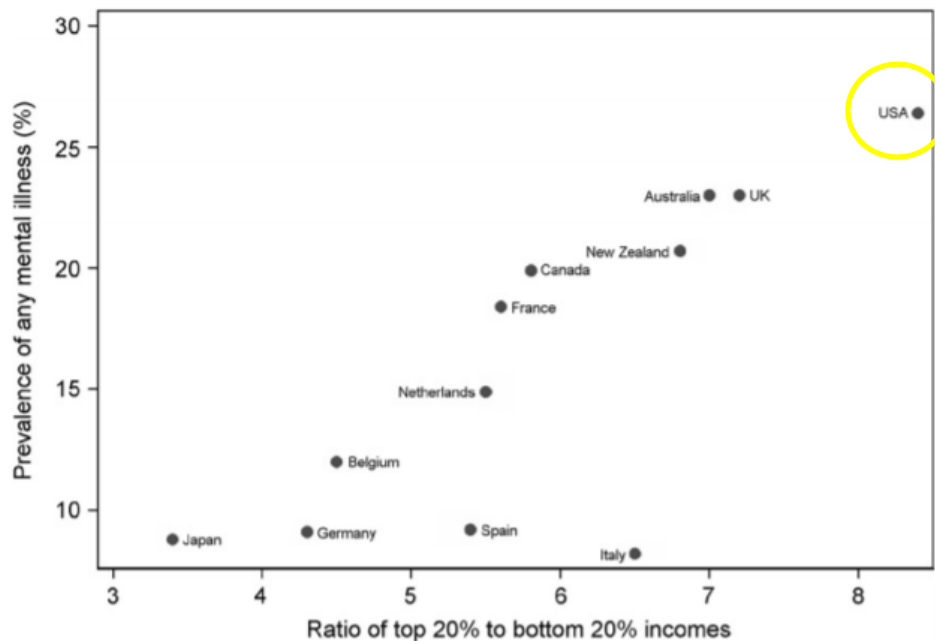
CHECK OUT WHAT ONE ARTICLE FOUND ABOUT HOW SOCIAL PROBLEMS ARE ASSOCIATED WITH INCOME INEQUALITY...

The problems of relative deprivation: Why some societies do better than others

Social Science & Medicine 65 (2007) 1965–1978

SOCIAL
SCIENCE
—&—
MEDICINE

Prevalence in mental illness in relation to income inequality among rich countries.



“The associations we have seen between income inequality and a range of health and social problems are far from trivial. Even ignoring extreme examples, there are ten-fold differences in homicide rates between more and less equal countries, six-fold differences in teenage birth rates, six-fold differences in the prevalence of obesity, four-fold differences in how much people feel they can trust each other, five- or ten-fold differences in imprisonment rates ... ” and so on.

“NUMEROUS SOCIAL PROBLEMS ASSOCIATED WITH RELATIVE DEPRIVATION
—FROM ILL HEALTH TO POORER EDUCATIONAL PERFORMANCE—
ARE MORE COMMON IN MORE UNEQUAL SOCIETIES.”

"MORE UNEQUAL SOCIETIES ARE SOCIALLY DYSFUNCTIONAL IN MANY DIFFERENT WAYS"

We *could* build more prisons, train more psychologists, hire more tutors, ask people to exercise more, and so on to deal with each individual problem. But maybe there are unsaid, unnoticed underlying **root** issues that don't get enough credit for contributing to our problems.

Sometimes we feel the weight of a lot of things on us that we just can't name. Before we take the weight of that on ourselves, as if something's wrong with us, let's put ourselves in the **larger context** that we live in.



If **SO MANY** people today are feeling overwhelmed, depressed, and anxious, let's stop for a moment and ask:

WHY?

Why are **SO many** children and adults in our society today feeling depressed, anxious, and overwhelmed?

What are all the things in the **bigger picture** of our families, communities, society, and world that make up the landscape for feeling depressed and overwhelmed?

What if how we feel is an **inevitable outcome** of this bigger picture of our society?

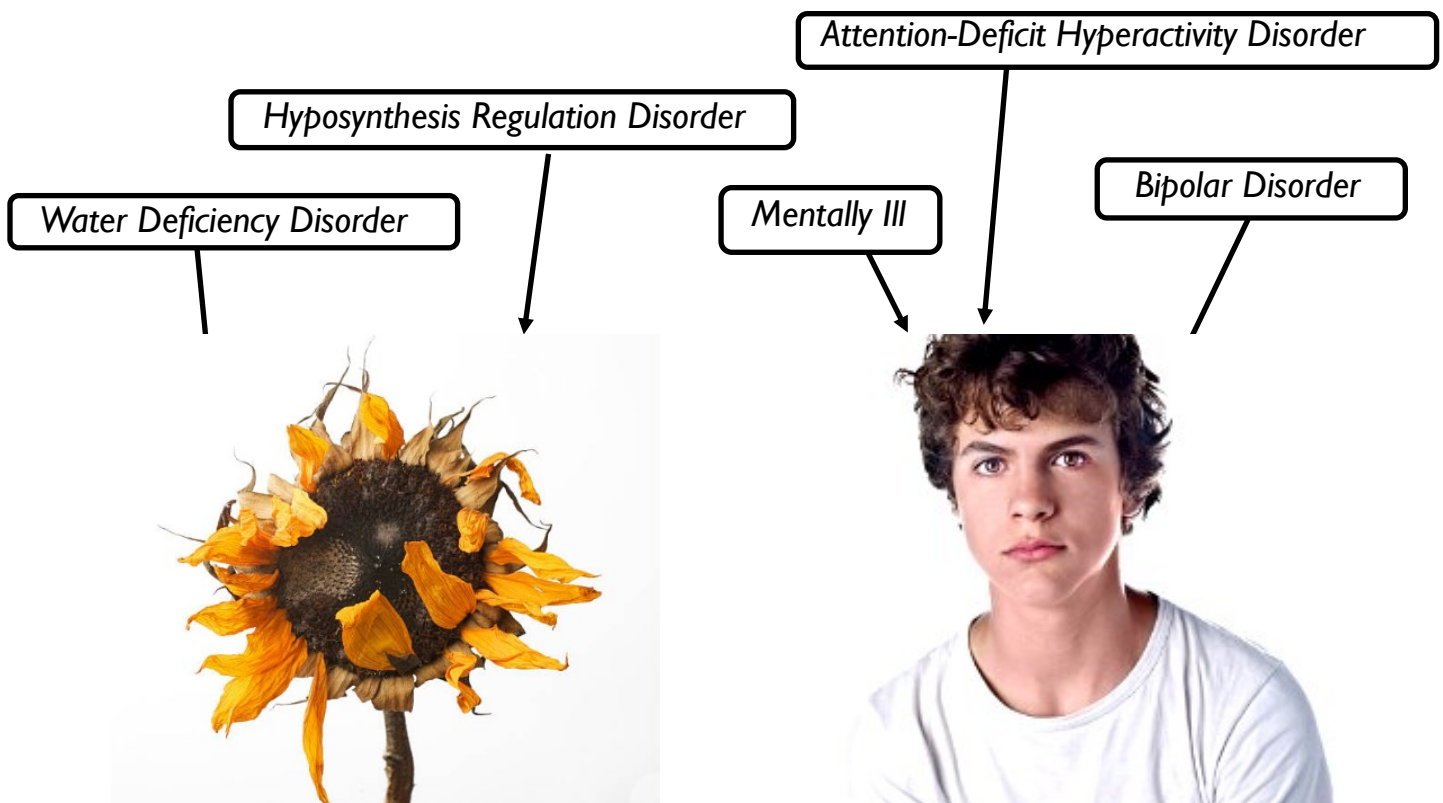
BRAINSTORM AND WRITE:

What are **all the things** that contribute to children and adults in our society today feeling so depressed, anxious, and overwhelmed?



Considering *all the things* that can impact our thinking, mood, and emotions, could there be a better name than “mental illness” for describing a person’s struggles?

Labels hold power. When we label a person’s struggles, like with the labels below, it makes it seem like THE PERSON is the problem, rather than attending to ALL THE THINGS that contribute to the person’s struggles.



When a person gets named, whether it be a positive nickname or something offensive, it tends to stick. In the case of a mental illness or behavioral health diagnosis, how might the label affect one’s life?

THE MOST POWERFUL THING YOU CAN DO IS GIVE SOMEONE
A STORY FOR THEIR PAIN.



Practice

How might you describe this sunflower? Without using labels like “sick” or “broken,” how would you describe **why** it appears the way it does?

THE MOST POWERFUL THING YOU CAN DO IS GIVE SOMEONE
A STORY FOR THEIR PAIN.



Practice

Thinking about ourselves the same way we thought about this sunflower, how would you describe *why* we appear the way we do?

REFLECT ... How do you communicate emotional pain?

Understanding that our pain and struggles are multi-faceted and impacted by many things from the bigger picture of our lives, it can be difficult to express exactly what we're feeling and why. Again, sometimes it seems as if there is no basis for what we feel. Or, in some instances, we can point to exactly why we feel the way we do. Either way, communicating our struggles in ways that others can hear it can be challenging.

- * What ways have you learned or tried to communicate emotional pain?
- * What makes it hard to communicate our pain?





TO READ

Web Search: “The Wind Never Lies” by Steven Morgan

<http://www.stevenmorganjr.com/read/>

TO WRITE

Write a paragraph about your life using all medical terms. (This might be especially relevant if you’ve ever been diagnosed or labeled with a mental illness.)

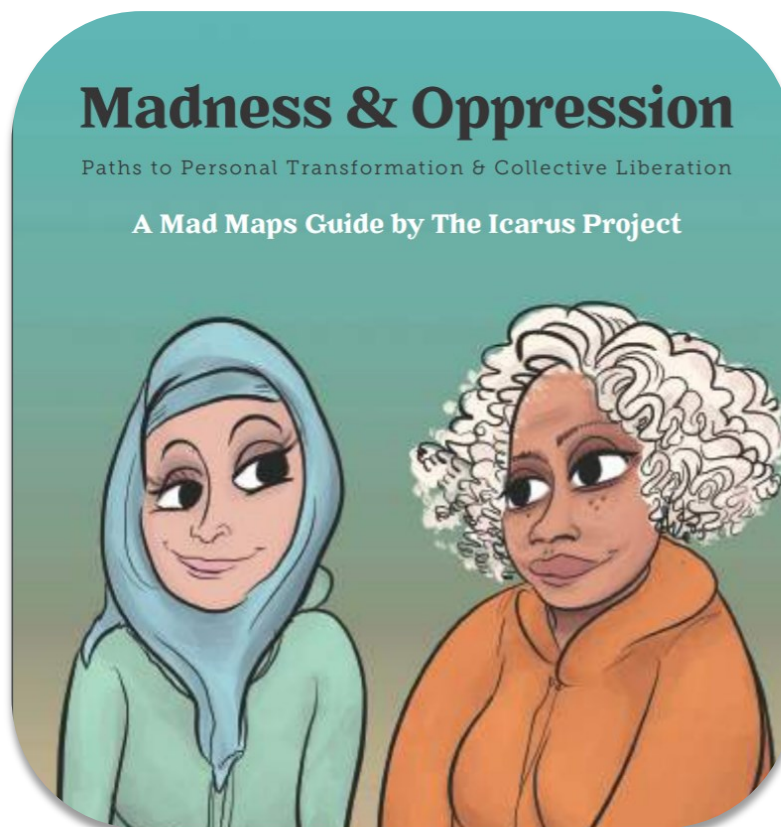
Now, write a paragraph about your life using **no** medical terms—for example, using the perspective of the larger context you live in or like how you would write about that sunflower.

PART 3: HOW DO WE RELATE TO OPPRESSION AND THE SOCIAL DEMANDS, EXPECTATIONS, AND PRESSURES PUT ON US?

Oppression is about power and control of some groups over other groups. All societies have forms of oppressions within them—where certain persons, groups, and institutions try to control the expression, freedoms, creation of knowledge, resources, and power of others.

Sometimes oppression is overt and easily recognizable, like people using racial slurs against someone with different skin color than them. Sometimes oppression is covert, hidden, and not easily recognizable, such as advertising messages delivered to control how we think about ourselves and manage our behavior.

Oppression is about control of people and control of resources, all to serve the interests of a few and never to truly disrupt the status quo. If you want to *really dig into oppression* more, we recommend you check out a free community resource by friends and allies at *The Icarus Project*, called *Madness & Oppression: A Mad Maps Guide*.



Find it here: <https://theicarusproject.net/resources/publications/>

SOCIAL LOCATION AND IDENTITIES

“The groups people belong to because of their place or position in history and society.

“All people have a social location that is defined by their gender, race, social class, age, ability, religion, sexual orientation, and geographic location.

“Each group membership confers a certain set of social roles and rules, power, and privilege (or lack of), which heavily influence our identity and how we see the world.”



How would you describe your **social locations**? Are there particular genders, classes, ages, abilities, preferences, backgrounds, etc., that construct your own social locations?

What about the many **roles** we take on for ourselves—such as youngest son, first-born daughter, artist, athlete, feminist, etc. What are some of the roles you take on?

OUR SOCIAL LOCATIONS ARE MANY AND VARIED.
BASED ON ONE OR MORE OF OUR SOCIAL LOCATIONS, WE MIGHT
EXPERIENCE LARGE AND SMALL FORMS OF OPPRESSION.

WHAT ARE EXAMPLES OF OPPRESSION THAT YOU RELATE TO?

- | | |
|---------------------------------------|---|
| <input type="checkbox"/> Racism | <input type="checkbox"/> Colonialism |
| <input type="checkbox"/> Sexism | <input type="checkbox"/> Normalism |
| <input type="checkbox"/> Misogyny | <input type="checkbox"/> Fundamentalism |
| <input type="checkbox"/> Patriarchy | <input type="checkbox"/> Sizeism |
| <input type="checkbox"/> Heterosexism | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Ableism | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Ageism | <input type="checkbox"/> Other _____ |

WHAT HAVE THESE EXPERIENCES MEANT FOR YOU?



HOW DOES OPPRESSION FEEL?
HOW CAN OPPRESSION
AFFECT US EMOTIONALLY?

Oppression can make us feel:

- ☐ Anxiety
- ☐ Despair
- ☐ Inferior
- ☐ Violated
- ☐ Worthless
- ☐ Hostile
- ☐ Violent
- ☐ Like we're invisible
- ☐ Alienated
- ☐ Angry
- ☐ Frightened
- ☐ Distrustful
- ☐ Embarrassed
- ☐ Exhausted
- ☐ Self-hating
- ☐ Like doors shutting in our face

HOW WOULD YOU DESCRIBE WHAT OPPRESSION FEELS LIKE?

HOW CAN OPPRESSION IMPACT US PERSONALLY AND SOCIALLY?

Not only can oppression impact how we feel, but it can also impact how we behave and how we relate to friends, family, and the world.

Impacts of oppression might include:

- ☐ Apathetic indifference to the world
- ☐ Withdrawing from the world
- ☐ Hiding from yourself and others
- ☐ Not trusting people
- ☐ Feeling panicky—racing heart, sweating, anxiety
- ☐ Lashing out, feeling violent
- ☐ Getting physically sick
- ☐ Limited interactions or false/inauthentic interactions
- ☐ Self-blame, shame, and guilt

HOW WOULD YOU DESCRIBE THE IMPACTS OF OPPRESSION, BASED ON YOUR OWN EXPERIENCES OR OBSERVATIONS?

SOCIAL EXPECTATIONS, DEMANDS, AND PRESSURES



In addition to the “isms” and oppression, we also experience multiple, sometimes competing, social expectations, demands, and pressures. Many of these are based on or connected to our social locations and social roles.

Expectations might be **explicit** (like your father telling you outright that you *must* go to college and get good grades) or **implicit** (like subtle messages from people and society that we should feel happy all the time).

For example, if you identify as White, heterosexual, educated, and athletic, what might people expect of you? What might your family, friends, teachers, neighbors, or employers expect or demand in terms of your behavior, attitude, drive and ambition, work ethic, and what you should want for yourself?

If you identify as African-American, middle class, Christian, and queer, what might people expect of you? What kinds of demands, pressures, and assumptions might others whom you know or don't know put on you?

SOCIAL EXPECTATIONS, DEMANDS, AND PRESSURES



What about if you identify as *you* and all the things you listed as making up your social locations and roles? What kinds of expectations might people around you hold about what you should be, do, have, or want?

- Expectations, demands, pressures around *how to feel*
- Expectations, demands, pressures around *how to act*
- Expectations, demands, pressures around *what to want or have*
- Expectations, demands, pressures around *my capabilities and my future*

DON'T 'SHOULD' ON ME!

The reality of this world is that we are loaded with expectations on how to live, work, play, and perform. Certain ways of being and living are valued as productive, normal, acceptable, or valuable, while other ways of being and living are de-valued or stigmatized.

Is this a game? Why are we even doing the things that we're doing?

Are we thinking and doing the way we do because we *'should'*?

According to whom, and *for what reasons?* Who benefits?

Reflect...

Why do you do some of the things you do?
What expectations, demands, or pressures are
you trying to live up to?

RADICAL THOUGHT



"We are told 'no', we're unimportant, we're peripheral. 'Get a degree, get a job, get a this, get a that.' And then you're a player, you don't want to even play in that game. You want to reclaim your mind and get it out of the hands of the cultural engineers who want to turn you into a half-baked moron consuming all this trash that's being manufactured out of the bones of a dying world." -"

~TERENCE MCKENNA

DON'T 'SHOULD' ON ME!

MAKE A LIST OF THE "SHOULDs" AND "SHOULDN'Ts" PLACED ON YOU.

These might come from people in your life, or they might be things that we put on ourselves. No judgment here—just list whatever comes to mind.

What I SHOULD be, do,
want, or have:

- ☐ I should be happy
- ☐ I should want to go out more
- ☐ I should have more friends
- ☐ I should eat less
- ☐ I should want to be "successful"

List more "shoulds" that you feel.

What I SHOULDN'T be, do,
want, or have:

- ☐ I shouldn't have so many negative thoughts
- ☐ I shouldn't waste so much time
- ☐ I shouldn't love that person
- ☐ I shouldn't be so afraid

List more "shouldn'ts" that you feel.

REFLECT... From your list of “shoulds” and “shouldn’ts,” where does each come from? Which feel authentic for you?

Which, if any, expectations feel authentic—meaning, deep down, these are things that you really, truly want for yourself, whether other people expect them of you or not.

Which, if any, do not feel authentic—meaning, deep down, these are things that you’re not sure feel right or good for you; it’s more like these are things we’re *supposed to* do or want or be.

What about your social roles, like athlete, artist, daughter, older brother, star achiever, etc.—to what extent do you accept these roles? How do you play into them? Are there any roles you reject or wish to stop playing into?

HOW CAN WE COPE WITH OPPRESSION AND SOCIAL EXPECTATIONS, DEMANDS, AND PRESSURES?

Oppression and social expectations clearly exist and are unlikely to go away in our lifetimes. What strategies have you used to cope with these realities? What might you offer to others who are feeling the weight of oppression or social expectations on their lives?

- ☐ Physical activity
- ☐ Activism, rallies, protests, advocacy
- ☐ Being part of a community
- ☐ Laughter and finding ways to have fun
- ☐ Speaking up
- ☐ Creative expression
- ☐ Getting educated
- ☐ Becoming more self-aware
- ☐ Therapy, counseling
- ☐ Being okay with 'not being okay'
- ☐ Telling the truth
- ☐ Finding like-minded friends
- ☐ Venting or "letting it out"
- ☐ Other ideas? _____
- ☐ Other ideas? _____
- ☐ Other ideas? _____





TO WATCH

Web Search: The Oppression Network, documentaries

<https://theantioppressionnetwork.com/resources/documentaries/>

Web Search: Angela Davis Speech, Women's March on Washington

<https://theantioppressionnetwork.com/resources/videos/>

Web Search: PBS, What Is a Microaggression?

<https://www.pbs.org/newshour/nation/what-is-a-microaggression>

TO READ

Web Search: Organizing Change, Why Patriarchy Exists (and How We Can Change It)

<https://organizingchange.org/patriarchy-persists-can-change/>

Web Search: Laura Delano, Recovering from Psychiatry, Psychiatric Oppression

<https://recoveringfrompsychiatry.com/tag/psychiatric-oppression/>

PART 4: HOW DO WE RELATE TO WHAT'S INVISIBLE AND THE CONNECTION/DISCONNECTION WE FEEL TO THINGS LARGER THAN OURSELVES?

We learn early on to experience the world through five main senses. Everyone knows these?



Are these really **All** our senses though? And are they **ONLY** externally focused? What if we actually had other senses too—senses that we don't give much credit or talk about as much? What, if any, other senses do you rely on?

What if our senses actually operate both **externally** and **internally**?
For example:

We hear things in the external world with our ears. But might we also hear voices, sounds, and thoughts inside our minds?

We see the outside world with our eyes. Might we also see images, visions, and sights with our internal "mind's eye?"

When something sharp, hot, or prickly touches our skin, the pain we feel is a message to move away. Might our internal pain similarly serve as a messenger?

REFLECT... How do YOU relate to “spiritual” or unusual sensory experiences?

Have you ever experienced the sensation of *acceleration*, like acceleration when you hit the gas in your car? What does that feel like?

What about feeling *life* or *time* speeding up (accelerating) and slowing down? Can you describe occasions when you’ve felt that sense? What are you doing when time seems to speed up? Slow down?

Have you experienced the sense of *familiarity*, like encountering something you’ve never encountered before, but yet it feels familiar somehow? Can you think of a time when that’s happened for you?

How about *other unseen things* we might pick up on? Magnetic or electrical fields, like awareness of north-south directions, or hairs standing up from static electricity? Air pressure and the force of gravity on us? What’s been your experience of such invisible things?

We actually have a variety of other sometimes subtle senses that some people are more attuned to than others. However, we never really talk about them or get taught to use them like we do the big 5 externally-focused senses. *Why do you think that is?*



Nature and the natural elements [earth, wind, fire, water] are also often ways people experience senses beyond the five we learn about in school.

WHAT KINDS OF CONNECTION OR COMMUNICATION HAVE YOU EXPERIENCED, IF EVER, FROM THE NATURAL WORLD?

- ☐ Listening to the whisper of the wind
- ☐ Looking into the flames of a fire
- ☐ Feeling the emotion of the earth
- ☐ Hearing what an animal is speaking to you
- ☐ Talking to trees or plants
- ☐ Feeling something from the sky or ocean
- ☐ Other ways: _____

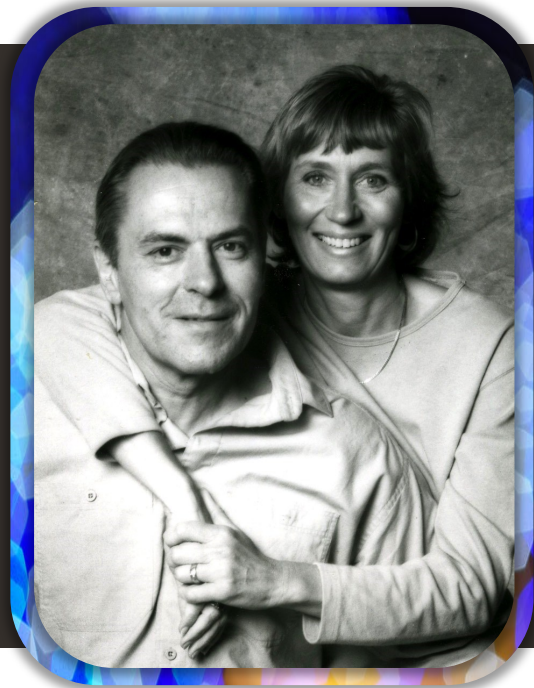
DESCRIBE WITH WORDS OR PICTURES A PARTICULAR EXPERIENCE OF THIS CONNECTION OR COMMUNICATION...

Many people connect in many different ways with what's unseen or invisible. And many people connect in many different ways with the natural world.

On the flip side, we also can feel *disconnected* from these things. And the process of not having connection, or when we're trying hard to reach for connection, can be intense.

Here's a term that speaks to this: **SPIRITUAL EMERGENCY**

Spiritual Emergency was coined by Stanislav Grof and his partner Christina Grof. The intentional play on words is supposed to give the idea that something intense is happening, but it could also be a time for one to "emerge" and transform from the experience. It can become a time of deep questioning, which is fertile ground for growth to spring from.



Spiritual emergency can be experienced as:

A crisis or as if something intense is happening, and it's also a time for one to "emerge" and transform from the experience. This can be a time of great transition.

It's as if the unseen, invisible things larger than ourselves are calling us forward, and to connect with that deeply and powerfully, we go through a time of deep questioning, intense emotion, confusion, and desperation.

On the other side often is a breakthrough, a transformation, or a higher level of awareness and connection to what's real for us in the world.

Let's explore this some more by reflecting on the prompts in the pages that follow...

WHAT CAN PROMPT A SPIRITUAL EMERGENCY OR EXISTENTIAL CRISIS?

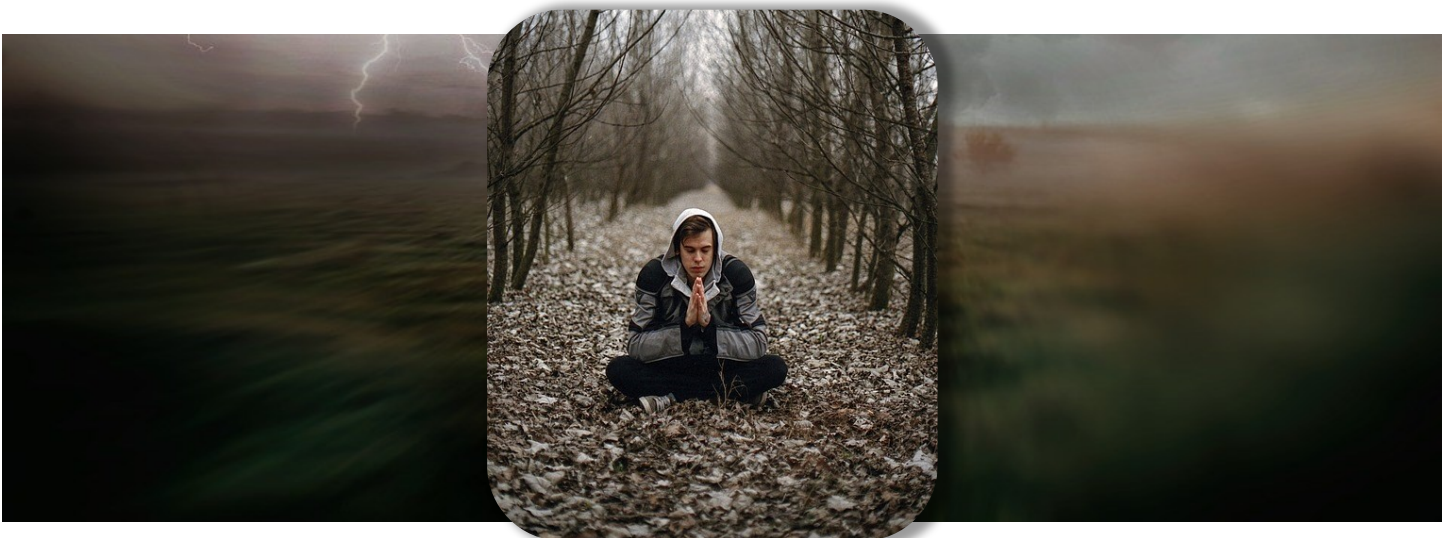
- ☐ Huge transitions in one's life
- ☐ Experiences that invoke deep personal work
- ☐ Childbirth
- ☐ Miscarriage, abortion
- ☐ Trauma
- ☐ Powerful sexual experience
- ☐ Addiction (to anything)
- ☐ Death
- ☐ Near-death experiences
- ☐ Divorce
- ☐ Loss of job
- ☐ Poverty
- ☐ Plant medicine
- ☐ Psychedelics
- ☐ Drug experience
- ☐ Psychic opening
- ☐ Deep sensitivity to energetic states
- ☐ UFO - alien experiences
- ☐ Channeling guides or spirits
- ☐ Traveling
- ☐ Natural disaster
- ☐ The dark night of the soul
- ☐ Other events that "shock" the system

Other ideas about what could prompt spiritual emergency?

You can use this space to list/describe/draw your own experience:

WHAT DOES IT FEEL LIKE TO BE IN SPIRITUAL EMERGENCY OR EXISTENTIAL CRISIS?

- ☐ Exhausted
- ☐ Might not know how to be or know what is important
- ☐ Experience non-ordinary state of consciousness
- ☐ Difficult to cope with ordinary demands of life
- ☐ Disconnected to spirit of self
- ☐ Soul loss (*soul = “our essence, life force, the part of our vitality that keeps us alive and thriving.”*)
- ☐ A scary time of loss of self and not knowing what to believe
- ☐ Distress and feeling overwhelmed with heavy emotions
- ☐ Asking questions: *Who am I? What is real? What is my purpose? Why am I here? What is the point?*
- ☐ Uncomfortable state of old self haunting in the shadows while trying to step into the new truths that we’ve discovered
- ☐ Struggling to let go of old beliefs, thoughts, feelings
- ☐ Dissociation, feeling out of body
- ☐ Feeling unreal, like in a dream
- ☐ Euphoria
- ☐ A “high” feeling, like you see all the connections or have opened up to all the mystery
- ☐ Uncertainty
- ☐ Frustration
- ☐ Hopelessness
- ☐ Low self-esteem
- ☐ Feeling like a part of you is dying
- ☐ Loneliness
- ☐ Depression
- ☐ Numbness
- ☐ Confusion
- ☐ Despair
- ☐ Energized mental activity
- ☐ Feeling abandoned (*by spirit, by whoever or whatever*)



WHAT CAN IT FEEL LIKE TO BE IN SPIRITUAL EMERGENCY OR EXISTENTIAL CRISIS?

DARK NIGHT OF THE SOUL

By *A La Lovely*

I'm heavy with emotions but yet I'm out of body.
I don't know what is going on with me.
But I am going to sit in it.
It's important to do so.
Positive words won't uplift me right now, I am too deep.
I don't even know what is real.
A lot is going on and I have a lot to do.
I don't even feel overwhelmed any more.
The feeling is more like a numbness to it all.
My mind escapes often.
Are things really happening?
What is real?
Pain feels real.
The ground feels real.
That's all I know right now.
I am lost in space...
Events take place
Ideas of events take place
Thoughts are creation
What happens when I am in space
Take these ideas off of me
I am no longer here
I am dissociated
I am a sensitive soul
That is what I know is real

HOW DO WE COPE WITH SPIRITUAL EMERGENCY AND HOW CAN WE MOVE THROUGH IT?

- ☐ Embodiment techniques
- ☐ Grounding techniques
- ☐ Naming it to supportive people
- ☐ Nourishing yourself with healthy food
- ☐ Spending time outside on the ground, in sunlight and moonlight
- ☐ Breathing fresh air
- ☐ Breathing exercises
- ☐ Moving your body through yoga, stretching, exercise, hikes in nature
- ☐ Seeing a supportive therapist or mentor
- ☐ Seeing a Shaman, shamanic practitioner, or spiritual coach
- ☐ Weighted blanket
- ☐ Reconnecting to spiritual practices
- ☐ Ceremony and ritual
- ☐ Letting go and accepting the experience as okay
- ☐ Don't give up!
- ☐ Framing it in a way that makes it understandable
- ☐ Avoid stimulants (caffeine, sugar)
- ☐ Listening to relaxing music
- ☐ Creative expression

Other ideas? _____

Other ideas? _____

Other ideas? _____



WHAT KINDS OF TRANSFORMATION CAN COME FROM A SPIRITUAL EMERGENCY?

- ☐ Expanded worldview
- ☐ Spiritual growth
- ☐ Re-connection to spirituality
(*connecting with the divine and higher purpose*)
- ☐ Released trauma
- ☐ A more authentic-feeling life
- ☐ A deeper meaning to life
- ☐ Feeling less fulfilled by the material world; a sense of emptiness from the world
- ☐ Greater sense of purpose
- ☐ Commitment to searching for what's true and "real" for you
- ☐ Finding new ways to feel fulfilled; old ways of life no longer feel fulfilling
- ☐ Integration, clarity, alignment
- ☐ Discovering your gifts

More? _____

More? _____

More? _____





TO READ

Stan Grof's website with books, articles, and other classics:

www.stanislawgrof.com

TO WATCH

Psychosis or Spiritual Awakening, Phil Borges TED Talk:

<https://www.youtube.com/watch?v=CFtsHf1IVl4>

TO DO

Earthing: Connecting with the ground with bare feet. Benefits discussed in these links:

<https://www.earthing.com/what-is-earthing/>
www.barefoothealing.com.au/v/what-is-earthing/22

Fire ceremony: Write down or draw what you desire to let go, and throw it into the fire. Write down or draw what you desire to let in, and feed it to the fire. Naming your intentions out loud can be a powerful addition to this ceremony. *(If you can't go outside, get tissue paper that burns quickly and can be used indoors.)*

Silent Nature Hike: Observe nature in a silent 30-minute hike. What can we learn from what surrounds us? Write or draw how you felt, symbols learned, resistance felt, or anything else that wants to be shared during or after your hike.

PART 5: HOW DO WE RELATE TO DRUGS AND MEDICINES USED TO ALTER OURSELVES?

If we look through the history of humankind, we quickly see that humans across the millennia and across all cultures have used **substances** from the environment to **intentionally change their mental or mood state**.



*Blue Lotus
Egypt*



*Medicinal Mushrooms
Rome*



*Cannabis
Neo-Assyrian Empire*



*Opium
Iraq*

Think about it—in our culture today...



Do you get ready for the day ahead by altering your state of mind with a cup of **coffee** or an energy drink?

How many people relax at the end of the day by drinking a **beer** or glass of **wine**?



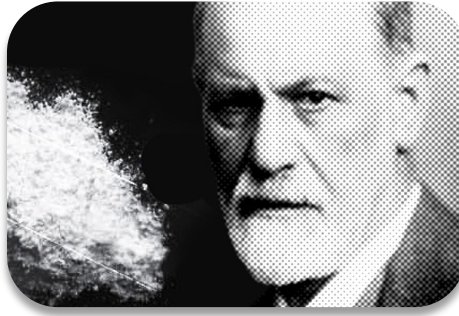
Do you remember the first time you experienced a **"sugar buzz"**?

As humans, we have the ability to intentionally change our mind and mood states with substances.

Our use of substances has inspired great thinkers, artists, musicians, and scientists.



Steve Jobs



Sigmund Freud



Salvador Dalí

Our use of substances has also caused dysfunction and destruction for individuals and societies.



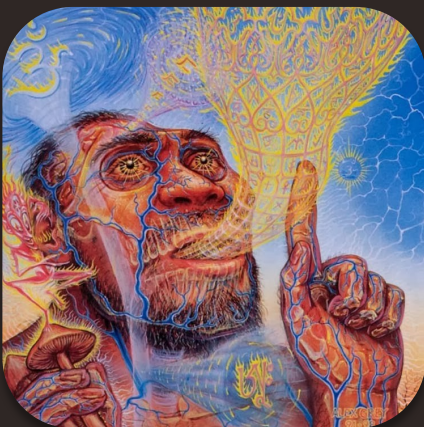
Illness



Drug wars



Addiction



Alex Grey, The Stoned Ape

RIGHT RELATIONSHIP WITH SUBSTANCES

THE CONCEPT OF **RIGHT RELATIONSHIP** SUGGESTS THAT IT'S NOT SO MUCH THE SUBSTANCES THEMSELVES THAT ARE "GOOD" OR "BAD," BUT RATHER HOW AND WHY WE USE THEM (OUR RELATIONSHIP) THAT MATTERS.

REFLECT... How do YOU relate to substances that change your mind or mood state?

- What drugs, medicines, or substances do you take (or have you taken)?
- Why do you take this substance? What are you looking for from this substance and why?
- In what context or setting do you use this substance?
- What stories do you hold about taking this substance—i.e., why you should or shouldn't take it, or what it means to take this substance?
- Are you using this substance in a way that feels nourishing to your body, mind, emotions, and interpersonal life; in a way that feels harmful or repressive; or something else?

STORY-TELLING AROUND **Drugs** AND **Medicines**

The stories and information we are told by parents, teachers, doctors, therapists, news media, politicians, and others about medicines and drugs do not always line up. Sometimes it feels like the **mixed messages** are just confirmation that nobody really knows what is going on.

From anti-drug messages (Just Say No!), to pharmaceutical advertising for antidepressants, activist groups trying to legalize formerly illicit substances, and alcohol companies advertising the good life and carefree spirits...

Where does society really stand on the use of drugs?

Who's an authority on this matter, and what information is trustworthy?

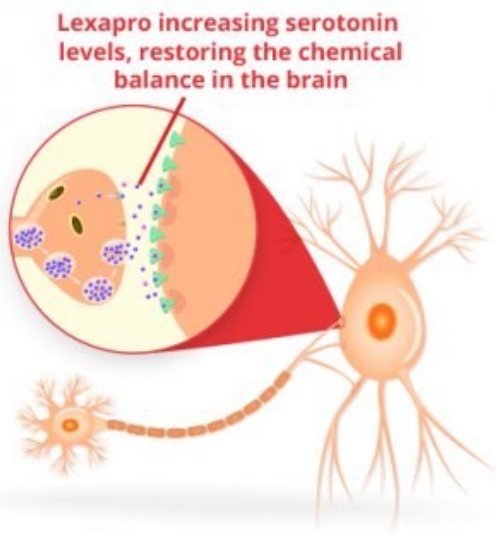


One message in particular is worth thinking more about. It's the message given to us by doctors, therapists, and others about taking prescription drugs for a mental health problem. Let's break this down...

STORY-TELLING AROUND **Drugs** AND **Medicines**

THE MYTH OF THE CHEMICAL IMBALANCE

With the massive number of people today using prescription drugs (like antidepressants, stimulants, antipsychotics, sleep aids) to alter their mind and mood states, there has to be a story told about why we're supposed to use these particular drugs (and not other drugs). Perhaps you've heard this story?....



This advertisement suggests that you have a chemical imbalance, a serotonin deficiency, or some other abnormality in your brain, and the drug (an antidepressant) helps to correct or regulate that imbalance.

Have you heard this story?
From whom or where?

Scientifically, we know that **the chemical imbalance story is not true.**

It's not taken seriously as a plausible hypothesis for why people are depressed or suffering. Yet, it is repeated over and over, even by doctors and therapists. Why? Some suggest it's a convenient story that "gets people" to take their medications, like a "little white lie." The problem is, there is simply no such thing (that we know of yet!) as a chemical imbalance that causes our suffering.

Here's one freely available article that explains some of the background on this issue and why this myth gets repeated.

Open access, freely available online

Essay

Serotonin and Depression: A Disconnect between the Advertisements and the Scientific Literature

Jeffrey R. Lacasse, Jonathan Leo*

<https://doi.org/10.1371/journal.pmed.0020392>

STORY-TELLING AROUND *Drugs* AND *Medicines*

RE-TELLING THE MYTH OF CHEMICAL IMBALANCE

Psychoactive drugs are substances that act on our central nervous systems to alter our thinking, feeling, or behavior. **All psychoactive drugs alter our minds, moods, and/or behaviors**—this, by definition, is what they are intended for.

Understanding this, there really is *no difference* between

- the drugs we use by prescription (e.g., antidepressants, stimulants),
- the drugs we use ‘on the street’ (e.g., cocaine, Molly), and
- the legal drugs we can buy (e.g., alcohol, marijuana).

The difference is in *the stories we tell about how and why we use them.*



On the next page, we provide two examples for re-telling the story around prescribed mental health drugs. Remember, these drugs do not correct “chemical imbalances.” They are psychoactive drugs and produce effects just like other psychoactive drugs.

RE-TELLING THE MYTH OF CHEMICAL IMBALANCE

EXAMPLE 1: Brianna feels anxious in social settings and generally prefers not to go out to socialize. However, if she must go out, Brianna will have a couple glasses of wine to help loosen up and feel less anxious around others.



- Would you say that Brianna's anxiety is caused by an **alcohol deficiency disorder**?
- When Brianna drinks alcohol, does it correct her alcohol deficiency imbalance?

Sound ridiculous?! Try re-telling this story:

Alcohol alters Brianna's mental and mood state in a way that **she finds helpful and desirable**.

Might it be true that antidepressants and other psychiatric drugs “work” in a similar way? That is, psychoactive drugs produce effects on our mind, mood, and behavior. Sometimes we find these effects helpful, other times unhelpful.

EXAMPLE 2: Juan gets a terrible headache and takes an aspirin to relieve the pain.

- Would you say that Juan's headache was originally caused by an **aspirin deficiency**?

Probably not! More likely, there could be many varied **reasons** why Juan is experiencing a headache.

The aspirin is **a tool to temporarily relieve the pain**.



Might this be true for prescription drugs too? That is, our pain exists for many possible **reasons**, and drugs may temporarily relieve some of the pain.

STORY-TELLING AROUND **Drugs** AND **Medicines**

OUR STORIES ARE A PRODUCT OF OUR TIME & PLACE IN HISTORY

Our stories about drugs and medicines are always changing. Drugs today that are prescribed and used liberally might be demonized tomorrow. For example, opioids and antidepressants have been prescribed for decades for all varieties of conditions, but today the negative consequences on long-term health, dependence, and withdrawal are very apparent. Here are some headlines that highlight these and other changing perceptions on drugs.

The New York Times

Many People Taking Antidepressants Discover They Cannot Quit

America's opioid crisis: how prescription drugs sparked a national trauma

Aggressive marketing of painkillers made from opium poppy led to a generation of addicts and the deaths of almost 100 people a day from overdoses

The Economist

Too often, poverty is treated with pills

Children whose parents are eligible for Medicaid are much more likely to be prescribed psychotropic drugs

The New York Times

When Drug Companies Hide Data

Pharmaceutical industry gets high on fat profits

The New York Times Magazine

Generation Adderall

Like many of my friends, I spent years using prescription stimulants to get through school and start my career. Then I tried to get off them.

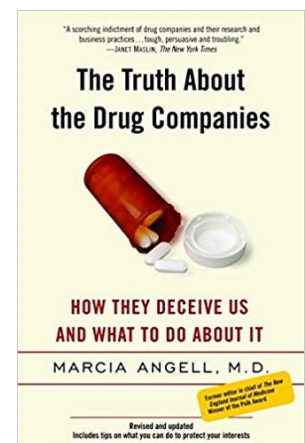
The New York Times

Lawsuit Over a Suicide Points to a Risk of Antidepressants

 AMERICAN PSYCHOLOGICAL ASSOCIATION

Inappropriate prescribing

Research shows that all too often, Americans are taking medications that may not work or may be inappropriate for their mental health problems.



STORY-TELLING AROUND **Drugs** AND **Medicines**

OUR STORIES ARE A PRODUCT OF OUR TIME & PLACE IN HISTORY

On the flipside, formerly demonized drugs might make a comeback in a resurgence of popularity. “Bad” drugs from a decade ago—like the psychedelics, mushrooms, LSD, or MDMA—are now transforming how we think about the question: *What is medicine?*

The Psychedelic Miracle

RollingStone

How some doctors are risking everything to unleash the healing power of MDMA, ayahuasca and other hallucinogens

The New York Times

Marijuana Legalization Has Gone Mainstream.



The FDA Has Acknowledged Psilocybin As A Potential Treatment For Depression

MIND

MENTAL HEALTH

Turn On, Tune In, Get Better: Psychedelic Drugs Hold Medical Promise

Psychedelic drugs are poised to be the next major breakthrough in mental health care

MDMA 'cures' sufferers' post-traumatic stress disorder in a few weeks during study

**PBS
NEWS
HOUR**

Why psychedelic drugs are having a medical renaissance

RollingStone

How LSD Microdosing Became the Hot New Business Trip

Regular doses of acid have become the creativity enhancer of choice for some professionals

Bottom Line: We have to be **our own experts** on when, how, and why we choose to alter ourselves with drugs. With huge industry profits, politics, social pressures, and changing paradigms involved, we are inundated with mixed messages and misinformation.

WHAT REALLY IS *Medicine?*

With all the mixed messages and false stories (like “chemical imbalances”) we receive about drugs, it might be time we re-think for ourselves what, really, is **medicine**. If you were to throw all the substances we consume into one big pot and stir it up, how would we determine which are medicines or which are drugs?

What’s the difference between “**medicine**” and “**drug**?”

Can the same substance be **both**? What about all the things listed below?

Would YOU label these various things drugs, medicines, passions, or problems?

Drug?

Medicine?

Passion?

Problem?

Sugar				
	Kratom	Cocaine		Magic mushrooms
Marijuana		Yoga	Adderall	
	Xanax	Alcohol		Lexapro (antidepressant)
	Social media	Serotonin	Heroin	
Cross Fit			Sex	
	Vyvanse (stimulant)	Ketamine	Television	Technology
Shopping		Water	Cigarettes	
Pornography	Hookah			Opiate painkillers
		Vaping/Juling	Video games	

Drugs are:

Medicines are:

Passions are:

Problems are:

WHAT REALLY IS *Medicine*?

How did you decide which of the previous things were drugs or medicines?
Passions or problems?

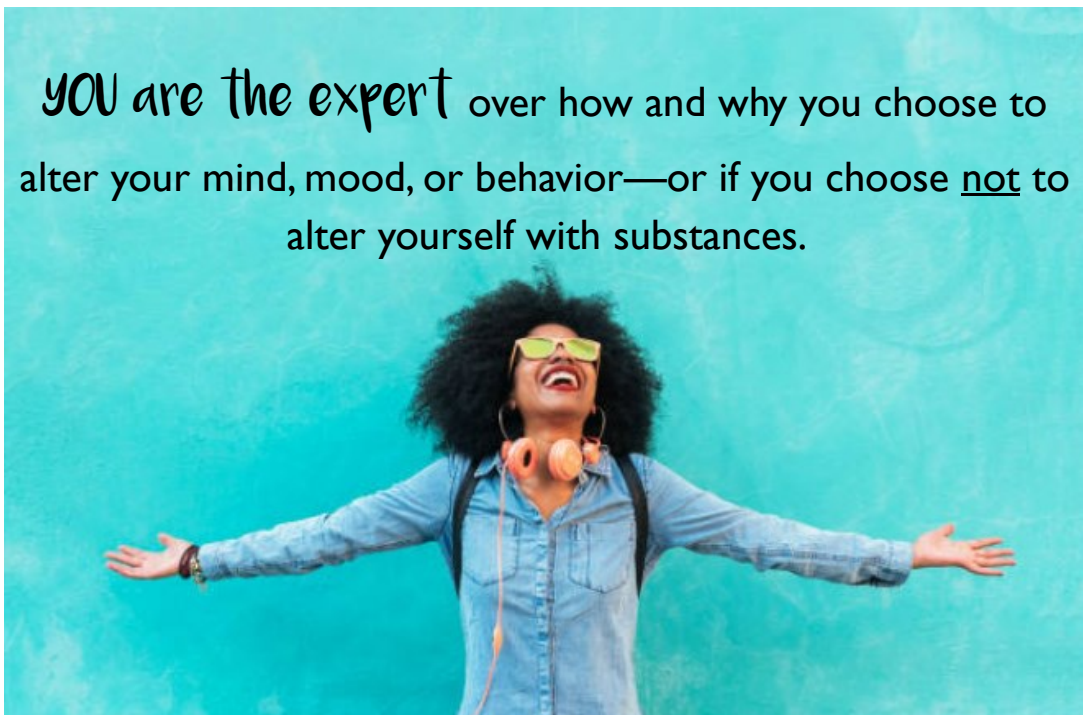
Did your decisions relate to:

- Context of use
- Why it's being used
- Intention behind use
- Consequences of use
- Other reasons you decided the way you did? _____

Bottom line:

- * Substances themselves are not *inherently* “good” or “bad.”
- * What matters is *our relationship to substances*, that is, how and why we use them. And this is a highly *individual* matter.

you are the expert over how and why you choose to alter your mind, mood, or behavior—or if you choose not to alter yourself with substances.



you ARE THE Expert OF YOUR EXPERIENCE

QUESTIONS TO ASK AS YOU CONSIDER TAKING A PSYCHOACTIVE SUBSTANCE:



- What is your baseline?
 - What do you feel like **before** taking the substance?
 - How are you mentally, emotionally, physically?
 - How are you eating, sleeping, playing, etc.?
- What are your **expectations** of the substance?
- What do you believe about this substance?
 - What **stories** do you tell yourself or have you heard from others about this substance?
- How will you know if you are getting the **benefits** that you are seeking?
- How will you track potential undesirable aspects of your use of the drug, like adverse effects and **harms** to you physically, mentally, emotionally, socially, and spiritually?
- How do you feel while **on** the substance?
- How do you feel when **stopping** or coming off of the substance?
- After having the substance 'out of your system' for a while, how do you feel about your **prior experience** with it?

TOOLS FOR TRACKING THE EFFECTS & IMPACTS OF SUBSTANCES

- Body awareness or body scanning
- Journaling
- Talking it through with a sympathetic, non-judgmental listener
- Medication Effects Checklist (see example on next page for monitoring adverse effects of prescribed medications)
- Other tools? _____



MEDICATION TREATMENT EMERGENT EFFECTS CHECKLIST

Client's name: _____ Date of assessment: ____/____/____ Assessor: _____

Drug(s) and dosage: _____

Instructions: Fill out before initial medication use, and at least once a month during, and for 3 months after, medication use. Inquire about the presence of each event over the **past week**. Causation by treatment need not be suspected or established. If present, score as **1** (mild), **2** (moderate), or **3** (severe). If not present, leave blank. For items listing different or opposite events (e.g., "increased" or "decreased" appetite, circle the appropriate one.)

Psychological	1, 2, 3	Gastrointestinal	1, 2, 3
1. Agitation (restless, nervous, hyperactive)		43. Increased or Decreased appetite	
2. Confusion, cognitive difficulties		44. Weight Gain or Loss	
3. Memory problems, forgetfulness		45. Abdominal pain or cramps, Stomach bloating	
4. Irritability (easily upset, angry)		46. Increased thirst	
5. Impulsivity		47. Nausea, vomiting	
6. Trouble concentrating or paying attention		48. Diarrhea	
7. Insomnia, trouble falling or staying asleep		49. Constipation	
8. Hypersomnia, trouble waking up		50. High blood sugar	
9. Crying spells, sadness		51. Other:	
10. Anxiety, tension, Panic (racing heart, breathless)		Musculoskeletal/Neurological	
11. Lethargy, apathy, sedation, drowsiness		52. Disequilibrium, unsteady gait, poor coordination	
12. Nightmares, intense dreaming		53. Spinning, swaying, lightheaded	
13. Feeling detached or unreal		54. Weakness, fatigue	
14. Elevated mood (feeling high/euphoric/giddy)		55. Numbness, burning or tingling sensations	
15. Mania/mood swings		56. Slowed movements, sluggishness, muscle rigidity	
16. Hearing voices, seeing things		57. Muscle cramps, stiffness, twitches, jerks, spasms	
17. Aggressivity, hostility		58. Restlessness, pacing, rocking, hopping, can't sit still	
18. Homicidal thoughts or urges		59. Tremor (slight shaking/trembling of limbs or muscles)	
19. Self-harm (cutting, piercing)		60. Any other abnormal involuntary movements anywhere	
20. Suicidal thoughts or urges		61. Other:	
21. Suicide attempts		Skin	
22. Other:		62. Increased or Reduced sweating	
Head/Face		63. Increased sensitivity to sun	
23. Headache		64. Chills or Feelings of warmth	
24. Blurred or Double vision		65. Rash, hives / Dry skin, crusty	
25. Sore eyes		66. Acne	
26. Ringing or other noises in the ears		67. Easy bruising	
27. Abnormal smells or tastes		68. Pale, yellowing skin	
28. Electric zap-like sensations in the head		69. Hair loss or Abnormal hair growth	
29. Drooling, excessive saliva		70. Other:	
30. Slurred speech		Genito-Urinary	
31. Tics, eye blinks, or grimaces		71. Menstrual disturbances (absent or irregular periods)	
32. Abnormal movements of mouth, lips, tongue		72. Difficulty urinating / Increased urination	
33. Expressionless, "zombie" look		73. Enuresis, night bedwetting	
34. Other:		74. Difficulties with orgasm	
Nose/Throat/Chest		75. Erectile dysfunction, impotence	
35. Runny nose/ Stuffed nose		76. High or Low sexual desire / activity (libido)	
36. Fever		77. Other:	
37. Flu-like aches and pains		Cardiovascular	
38. Sore throat/Difficulty swallowing		78. High blood pressure	
39. Labored breathing		79. Arrhythmia (irregular heartbeat)	
40. Chest pain		80. Tachycardia (abnormally fast heartbeat)	
41. Breast swelling or discharge		81. Cardiac arrest	
42. Other:		82. Other:	

Adapted from: Kalachnik JE. Measuring side effects of psychopharmacologic medication. *Mental Retardation & Developm. Disability Research Review* 1999; 4, 349-359; 2) Rosenbaum et al. SSRI discontinuation syndrome. *Biological Psychiatry* 1998; 44, 77-87. (3) Bezchlibnyk-Butler & Jeffries, 2005, *Clinical handbook of psychotropic drugs* (15th rev. ed). Seattle: Hogrefe.

www.CriticalThinkRx.org

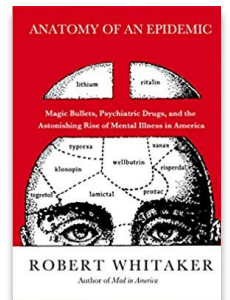
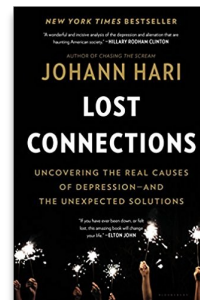
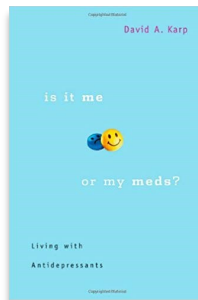


To Read:

Web Search: Vice, “A Neuroscientist Explains How He Found Out Meth Is Almost Identical to Adderall”

https://www.vice.com/en_us/article/7bdabb/a-neuroscientist-explains-how-he-found-out-meth-is-almost-identical-to-adderall

BOOKS →



To Watch:

Gabor Mate—The Myth of Normal https://www.youtube.com/watch?v=8_j5mmBa4mw

To Do:

Explore your personal baseline. Set aside a few moments throughout your day to check in with yourself about your baseline. Take time in the morning to note what a baseline for a typical morning is, do the same with the rest of your day. What does your baseline feel or look like at work? What about before a good night's rest?

Websites for Drug Information:

- erowid.com
- askapatient.com
- theinnercompass.org (Inner Compass Initiative)
- bluelight.org
- crazymeds.us
- madinamerica.com/anatomy-of-an-epidemic/

PART 6:

HOW DO WE RELATE TO OURSELVES AS AGENTS OF CHANGE FOR OURSELVES, OUR PEERS, AND OUR COMMUNITY?

There are so many ways we can tell our story. Others around us, such as doctors, therapists, parents, and friends might, purposely or accidentally, limit how we tell our story by imposing their own ideas on us.



For example, you might hear from a doctor that you are depressed because of a chemical imbalance in your brain, and then internalize the idea that your mood and behavior are out of your control.

Or, you might get messages from family or friends that you are overly dramatic or that you are too sensitive, when a truer story could be that you are more empathic and more in tune with big feelings that others don't face.



Bottom Line: We get a lot of invalidating, limiting, confused, and misinformed messages and information from lots of different people in our lives.



HOW DO WE RELATE TO OURSELVES AS AGENTS OF CHANGE FOR OURSELVES, OUR PEERS, AND OUR COMMUNITY?

In this guide, we've explored the ways we are impacted by...

BODY AND EMOTIONS

"My body and feelings hold information for me, if I tune in and listen to it."

LARGER SOCIETY

"Capitalism makes me feel hopeless and despairing, like I have to compete for jobs and a life that I don't even want."

OPPRESSION, SOCIAL DEMANDS, AND EXPECTATIONS

"I hate these masks I have to wear so other people think I'm 'normal'."

DISCONNECTION AND CONNECTION, OR SPIRITUALITY

"I feel empty, like nothing matters, and I yearn for a sense of connection to something real in the world."

MEDICINES AND DRUGS

"My doctor tells me I should get on an antidepressant, but I'm not sure that's really *medicine* for me."

How do we tell our own story?

With everything we've explored, how do we now tell our own story?

What is the best-feeling story we can tell about ourselves?

This is the **power** we have that no one can take from us—
the ability to **tell our own story**.



Our story is not something that we tell one time and then it stays the same forever...

We are constantly telling, revising, and re-telling our story.

And if one story we've been telling ourselves isn't working well for us, we can try
telling a different story!

How do we tell our own story?

FOR EXAMPLE...



My symptoms of depression start getting bad and I know there's not much I can do but suffer through it. It comes out of nowhere and no one understands what it's like. I'm a messed up person who can't do anything right.

— OR —

I can feel myself starting to sink into despair, and I know there's more out there but haven't been able to sync up with whatever it is I'm yearning for. When I get busy with distractions and stuff that I know, deep down, I don't care about all that much, the despair comes up and reminds me that I'm off track. I don't totally know what to do with it yet, but I know I want to listen and keep reaching for something I connect with in a real way.



I'm struggling to understand what's real in my head and what is made up. My relationship is a mess and I'm sure my girlfriend is ready to break up with me. She's great, but I don't think I'm enough for her. And I have no idea what I'm going to do for a job after I'm done with school. Everything is just too much and I feel like I'm about to break.

— OR —

Everything around me feels so serious—school, job, finding a career path, and keeping a relationship. It all feels so serious and it causes me to be extra hard on myself. I'm super self-critical and that makes me feel like crap. However, it also fuels my being hard-working and driven to do well. I want to find a way to use it as fuel and not let it beat me up. I'd like to find a way to lighten up, even in a world that probably never will. I want to feel like who I am is enough.



How do YOU tell YOUR own story?

Use this space to practice telling your own story. Try telling it a couple different ways, and reflect on **which version feels better**. How can you tell your story in a way that validates your experience and also opens up possibilities for what your body, feelings, and thoughts might be communicating?



Now that we've begun this exploration for ourselves,
how do we *share* in the process with others?

Humans are social animals. We naturally form groups, and we need social interaction. However, cultivating social interactions that nourish us and help us heal and grow as people does not necessarily come automatically. Finding your community, finding your people who accept and support you no matter what—that can require deliberate action and putting yourself out there.



Being in relationship with others can be a major form of support for us humans. Here, we offer a few principles for *being in relationship* and creating group spaces for *mutual support*. We will describe each of these in more detail...

1. SHOWING UP
2. AUTHENTICITY
3. LISTENING AND VALIDATING
4. RESPECTING YOUR OWN AND OTHERS' EXPERIENCES

Showing Up

Community can only exist when we show up for one another. This is the most basic building block of relationships. We have to show up for ourselves and for each other. Who or what you show up for is entirely up to you. But when you find a person, group, or cause that resonates with you or feels important, the most essential thing you can do is Show Up.

Authenticity

You are enough. When you show up in group spaces, show up as yourself. Can you imagine if we all showed up in places just as we were, not hiding or pretending to be anything different? You are you, and that's the best any of us has to offer. Nobody has this thing (i.e., life) all figured out, and the magic really happens when we drop our masks and show up together in our uncertainty, not-knowing, and individual experiences.

Listening and Validating

An important step we can take in any of our relationships is to listen and validate. This is about acceptance of ourselves and others, wherever we're at with our lives. Validating does not mean you agree with a person or situation. It does acknowledge though that there is no right or wrong way to feel. Validating strengthens relationships because it allows space for people to show up exactly as they are, without having to be anything different. Isn't that what we're all craving within our relationships?

Respecting Your Own & Others

As you show up, as yourself, and listen to and validate the experiences of others around you, you'll gather insights and reflections that apply to your own experiences. This is how learning, growth, and change happen—in relationship with others. It is tempting to fall into the trap of trying to fix other people's problems and give advice, but being in relationship with others is about us showing up authentically with our own lived experiences. If we offer tools and perspectives to others, it's because we've used them in our own life and have found them beneficial. You are the expert of your experience, and building relationships of mutual support rests on respecting others as the expert of their own experience.

Extra Tips for Listening and Validating

Listening and validating are not, for many people, the natural way we have learned to communicate and be in relationship with others. Think about it: What were the communication norms in your family system growing up?

Here are a few simple tips for practicing Listening and Validating. Note that you can validate your own experiences, as well as those of others. Think about how you might apply these tips for self-validation?



- **Be Present.** When you're sharing a space of dialogue with a person or group, just be there. Put the phone down, don't multi-task, and don't distract yourself. Try not to be thinking about what you're going to say next or guess what the person in front of you is about to say. Even if things get uncomfortable or intense, try to stay present and simply "be with" the person or situation in front of you.
- **Accurate Reflection.** Part of validating another person's experience is to simply summarize back to them what you heard them just say. No judgment, no advice. Simply reflect back "this is what I heard you say..."
- **Understand Context.** Sometimes you have fuller context for understanding a person's reactions or feelings. You might validate what someone is experiencing currently by naming how it makes sense given the fact of what they have been through. For example, "Given what happened to you, I understand you feeling the way you do."
- **Normalize.** Humans are capable of a wide range of feelings and emotions, and there is no wrong way to feel. Sometimes it's validating just to have someone tell us that what we're feeling is normal. For example, "Of course you're scared right now, this is a scary thing to do."

How Else Can We Show Up for Each Other?

When you're having a hard time, how can people help you? How can you help others?

- | | |
|---|--|
| <input type="checkbox"/> Listen to me | <input type="checkbox"/> Remind me of my positive traits |
| <input type="checkbox"/> Tell me what I'm feeling is normal | <input type="checkbox"/> Breathe with me |
| <input type="checkbox"/> Don't give me advice | <input type="checkbox"/> Distract me with silly things |
| <input type="checkbox"/> Invite me to go socialize | <input type="checkbox"/> Don't rush me |
| <input type="checkbox"/> Come over and hang out | <input type="checkbox"/> Stay with me |
| <input type="checkbox"/> Go out in nature with me | <input type="checkbox"/> Believe me |
| <input type="checkbox"/> Give me space | <input type="checkbox"/> Other ideas? _____ |
| <input type="checkbox"/> Bring me a gift you made just for me | <input type="checkbox"/> Other ideas? _____ |
| <input type="checkbox"/> Help me call my therapist | |

How else can we help each other? In your experience, what is helpful/supportive?
What is not?

What would it take for you to be able to **receive** help/support like this?

What would it take for you to **give** help/support like this?

Being an Agent for Change

Being a change agent in our lives and the lives of people around us might be as simple as the concepts of:

- * Tapping into our power to tell/re-tell our own story, and
- * Sharing with others in the spirit of mutual support

By committing to our own personal discovery and growth, we model that for others and give permission for others to show up as they are too. Our experience of our slice of the world begins to be shaped by how we show up to it, as if what we're doing emanates outward and creates the space for others to show up too.

THIS PRINCIPLE IS REFLECTED IN GANDHI'S SUGGESTION TO...



"Be the change you wish to see".

—OR FROM THE DALAI LAMA...



"We can never obtain peace in the outer world until we make peace with ourselves".

Change starts with us, and our power starts with the stories we choose to tell about our lives, our pain, our past, our present, and our future. There is no particular outcome to be reached. All we have is the process of telling our story and hearing the stories of others. Through showing up with authenticity in mutually supportive relationships, we change.

Being an Agent for Change

Being an agent for **social change** is an extension of being an agent of change for ourselves. **Expanding our power outwards** to things larger than ourselves can bring a great sense of purpose and meaning to our lives. Of course, it can also feel daunting and overwhelming. Plugging into a sense of **community**, so that it feels like you're not in this alone, is a vital component for **both** individual and social change.

Reflecting on broader social change, what kinds of changes would you like to see in the world around you?

- ☐ People really listening to one another
- ☐ Respect for different ways of thinking or living
- ☐ Families that don't hurt each other
- ☐ Better care of the natural world and environment
- ☐ Jobs that pay a decent wage that people can actually live on
- ☐ Good schools that students feel safe in
- ☐ A mental health system that listens and validates many different lived experiences
- ☐ Integrated, whole-person care when people are having a hard time
- ☐ A slower pace of life
- ☐ Tighter communities that really support each other
- ☐ What other changes? _____
- ☐ What other changes? _____
- ☐ What other changes? _____

Being an Agent for Change

We believe that you are a powerful agent of change, for your own life and for the world around you. Something brought you to read these pages, and that means that something in you is calling itself forward. **Move towards** whatever is calling you. Remain **curious**. And be deliberate with **the stories you choose** to tell yourself.



You are not in this alone! And you do not have to take on change, at any level, as if you are alone in it. Even what you're reading in this guide, right now in this moment, is part of a social movement, which means that **YOU are part of a social movement and a community of people** working to change the way we tell the story of our emotional pain.

Finally, when you're oriented toward making social change, it's also important to remember that everything can look like failure in the middle. **Perseverance** is key to getting past the middle.

Have you ever seen a cake half made? If we stop in the middle of a recipe, the cake is for sure a failure. But if we see it through to the end, who knows what kind of cake we might have?

This does not mean failing will never be a part of our life experience, but our perseverance does mean we can enjoy the small successes along the way and stay focused on the **process** of experiencing ourselves in the world.

In life, we don't always know where we are. Are we at the very start of something, in the middle, or nearing the finish line? Sometimes all we can do is **keep moving towards** whatever it is we feel called to, not always knowing what the bigger picture holds.



To Visit:

The Icarus Project is a support network and education project by and for people who experience the world in ways that are often diagnosed as mental illness. We advance social justice by fostering mutual aid practices that reconnect healing and collective liberation. We transform ourselves through transforming the world around us. <https://theicarusproject.net/>

The Hearing Voices Network is part of an international collaboration between professionals, people with lived experience, and their families to develop an alternative approach to coping with emotional distress that is empowering and useful to people, and does not start from the assumption that they have a chronic illness. <http://www.hearingvoicesusa.org/>

To Watch:

Web Search: “It’s not the nail!” video on listening and validating: <http://www.jasonheadley.com/INATN.html>

Web Search: Laura Delano’s story, “Recovering myself: A talk about journeying through the mental health system and coming back to oneself” <https://www.youtube.com/watch?v=R0dQSdoTrmY>

To Do:

Interested in holding group space for peer support? Here are a few tips to get started:

- The number one thing that makes groups possible is showing up. Even if it is just you and one other person showing up, the group has value when people are together.
- There are probably lots of places in your town that offer space for small group gatherings free of charge, from public libraries, to fire departments, coffee shops to yoga studios, there is a place for your group in the community.
- It might be useful to have a routine, or conversation prompts or discussions topics for the group. It could be as simple as “checking in” to explore and share how everyone is feeling this week.
- Groups take practice. Just like relationships they may not always be easy and smooth, but if we see them as practice we know we’ll get better at them over time.
- Sharing our personal lives and experiences with others can be scary; people appreciate support, encouragement, listening, and validation.

To contact us, please email
info@nowaksociety.org

For more information, please visit
www.nowaksociety.org

www.chhs.colostate.edu/ssw/research/alternatives-for-mental-health-and-healing-lab

